# Village of South Russell

BUILDING AND ZONING DEPARTMENT
5205 Chillicothe Road
South Russell, Ohio 44022
440-338-1312
building@southrussell.com


## CONTRACTOR REGISTRATION REQUIREMENTS

It is the requirement of this State Certified Building Department that all contractors or sub trades be licensed or registered to do work for the year in which this takes place, prior to the commencement of any work.

Please use this checklist to ensure all required paperwork is submitted at the same time.

- ☐ Completed and Notarized* Application for Contractor Registration (attached)
- ☐ A Completed Withholding and Business Registration Form (attached)
- ☐ A Valid Certificate of Liability Insurance Naming South Russell as Certificate Holder and Additional Insured
- ☐ A Valid Copy of your Current State License(s)
- ☐ A Valid Copy of your Workers Compensation Certificate
- ☐ An Original Bond, Completed by your Insurance Company and Signed by the Principal of the Company (bond form attached)
- ☐ A $100 Fee for Each Registration Type

*A Notary is available in the office; please call ahead if you need this service

Please note we only accept checks (preferred) or cash as payment.

If you have any questions, please call the office at 440-338-1312. Hours of Operation are Monday-Thursday: 8am-3pm and Friday: 8am-Noon.

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**For Office Use Only**

Bond: _____
COI: _____
WC: _____
SL: _____
Receipt: _____

CONTRACTOR REGISTRATION APPLICATION
PLEASE PRINT CLEARLY OR TYPE INFORMATION

_____
Company Name

_____
Principal's Name

_____
Address City State Zip

_____ _____
Telephone email address

**TYPE OF CONTRACTOR (check one)**

General ____ HVAC ____ Electrician ____ Structural Steel ____ Rough Carpenter _____

Excavator/Trencher ____ Mason/Brick Layer ____ Cement Finisher ____ Septic _____

Plumber ____ Roofer ____ Sign Installer ____ Other _____

**LIST TWO OTHER COMMUNITIES WHERE YOU HOLD A VALID CONTRACTOR REGISTRATION OR LICENSES:**

1._____ 2. _____

Contractor has in effect, with premiums fully paid, Workers Compensation coverage, unless exempted by the State of Ohio. Coverage is provided for all employees either through Ohio Workers' Compensation insurance or other applicable insurance if exempt from Ohio Workers' Compensation insurance.

Contractor hereby agrees to follow all ordinances and zoning regulations in the Village of South Russell and understands that failure to do so may result in revocation of contractor license.

_____ _____
AUTHORIZED SIGNATURE (Must be Notarized) DATE

STATE OF OHIO, COUNTY OF _____ ss:

_____affirms that the statements made in the foregoing affidavit are true, under penalty of perjury. Subscribed and affirmed to me this _____ day of _____, 20_____.

_____ My Commission Expires: _____
Notary Public

# WITHHOLDING AND BUSINESS REGISTRATION

FEDERAL IDENTIFICATION NO. _____

NAME OR CORPORATE NAME _____

BUSINESS OR TRADE NAME _____

STREET ADDRESS _____

CITY, STATE AND ZIP CODE _____

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CHECK ONE - SOLE PROPRIETORSHIP _____

PARTNERSHIP _____

CORPORATION _____

NON - PROFIT CORP. _____

ESTATE OR TRUST _____

GOVERNMENTAL _____

UNION _____

WILL YOU BE WITHHOLDING MORE THAN

$100.00 PER MONTH IN CITY TAXES? _____ YES _____ NO

NUMBER OF EMPLOYEES _____

TYPE OF BUSINESS (MFG. COMMERCIAL, ETC.) _____

DATE BUSINESS STARTED _____

FISCAL PERIOD ENDING MONTH. _____

NAME OF PERSON RESPONSIBLE FOR FILING FORMS _____

_____ TITLE _____

TELEPHONE NUMBER ( ) _____

SIGNATURE _____ DATE _____

# CONTRACTOR'S BOND
# VILLAGE OF SOUTH RUSSELL

KNOW ALL MEN BY THESE PRESENTS, THAT_____

_____AS PRINCIPAL AND_____

as surety are held and firmly bound unto the Village of South Russell, or to any of its officers, for the use of any person, persons, firms, or corporation with whom such principal shall contract, alter, repair, add to, subtract from, reconstruct or remodel any building, structure or appurtenance thereto or any part thereof, in accordance with the provision and the requirements of the Building, Plumbing, Electrical, Heating, Ventilation, or other Codes of the Village of South Russell, in the penal sum of Ten Thousand Dollars ($10,000.00) lawful money of the United States, for the payment of which sum well and truly is to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

SIGNED and sealed this _____ day of _____, _____.

THE CONDITIONS OF THE ABOVE OBLIGATION ARE SUCH, that whereas the above bounden _____ has made application to the Building Department for a Certificate of Registration or License as a contractor to engage in the business of:

| | | |
|---|---|---|
| ___General Contracting | ___Paving/Cement | ___ HVAC |
| ___Siding/Roofing/Windows | ___Fence | ___Sewer |
| ___Electrical | ___Plumbing | ___Signs |
| ___Fire Protection | ___Excavating | |

within the Village of South Russell during the year beginning_____and ending as of December 31, 20_____.

NOW THEREFORE, if the said _____ shall well and truly indemnify, keep and save harmless the Village of South Russell or any of its agents or officials for the use of any person, firm, or corporation with whom such contractor to do work, and shall indemnify and pay any such person, persons, firm or corporation for damage sustained on account of the failure of such contract or to perform the work so contracted for in accordance with the provision of the applicable Codes of the Village of South Russell and any and all lawful rules and regulations promulated under the authority thereof, and from or by reason or of on account of anything done under and by virtue of any permits issued under such registration or doing of any work required to be done in the construction, alteration, repair, addition to, subtraction from, reconstruction or remodeling of any building, structure or appurtenance thereto, or any part thereof then this obligation shall be null and void, otherwise, to remain in full force and effect.

PRINCIPAL:_____
SIGNATURE REQUIRED FOR VALIDATION
ADDRESS:_____
SOCIAL SECURITY NO._____
FEDERAL I.D. NO._____

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SURETY

(If this Bond is executed by an agent for a Principal or a Surety, such Agent must affix a copy of his Power of Attorney or other evidence of authority to execute the Bond. If the Surety is a non-resident corporation of the State of Ohio, its authority to do business in Ohio must, likewise, be attached hereto.)